Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                                       |                                |                     |                  |       | SMALL ENTITY TYPE |                        |       | OTHER THAN OR SMALL ENTITY |                        |
|--|---|---|---------------------------------------|--------------------------------|---------------------|------------------|-------|-------------------|------------------------|-------|----------------------------|------------------------|
| TOTAL CLAIMS   |   |   | 77                                    |                                |                     |                  |       | RATE              | FEE                    | 1     | RATE                       | FEE                    |
| FOR  |   |   | NUMBER FILED                          |                                | NUMBER EXTRA        |                  |       | BASIC FEE         | 375.00                 | OR    | BASIC FEE                  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 2.7 minus 20=                         |                                | * 7                 |                  |       | X\$ 9=            |                        | OR    | X\$18=                     | 26                     |
| INDEPENDENT CLAIMS   |   |   | 3 mi                                  | nus 3 =                        | * +                 |                  |       | X42=              |                        | OR    | X84=                       |                        |
| ML   | LTIPLE DEPEN                                | IDENT CLAIM P                             | RESENT                                |                                |                     |                  |       | +140=             |                        |       | +280=                      |                        |
| * If   | the difference                              | in column 1 is                            | less than zero, enter "0" in column 2 |                                |                     |                  | TOTAL |                   | OR                     | TOTAL | 70/                        |                        |
| CLAIMS AS AMENDED - PART II  |   |   |                                       |                                |                     |                  |       | IOIAL             |                        | OR    | OTHER                      | 786<br>THAN            |
|  |   | (Column 1)                                | (Column 2                             |                                |                     | (Column 3)       |       | SMALL             | ENTITY                 | OR    | SMALL                      |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUMI<br>PREVIC<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total                                       | *   | Minus                                 | **                             |                     | =                |       | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|  | Independent                                 | *   | Minus                                 | ***                            |                     |                  |       | X42=              |                        | OR    | X84=                       |                        |
| Ĺ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL |   |                                       |                                |                     |                  |       | +140=             |                        | OR    | +280=                      |                        |
|  |   |   |                                       |                                |                     |                  |       | TOTAL             |                        |       | TOTAL                      | ;                      |
| (Column 1) (Column 2) (Column 3)   |   |   |                                       |                                |                     |                  |       | ADDIT. FEE        |                        | Un    | ADDIT. FEE                 |                        |
| AMENDMENT B  |   | CLAIMS REMAINING AFTER AMENDMENT          |                                       | HIGH<br>NUM<br>PREVIO<br>PAID  | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total                                       | *   | Minus                                 | **                             |                     | =                | ] [   | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|  | Independent                                 | *   | Minus                                 | ***                            |                     | =                |       | X42=              |                        | OR    | X84=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |   |                                       |                                |                     |                  |       | +140=             |                        | OR    | +280=                      |                        |
|  | TOTAL<br>ADDIT. FEE                         |   |                                       |                                |                     |                  |       |                   |                        |       | TOTAL                      |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |                                       |                                |                     |                  |       | ADDII. FEE        |                        |       | ADDIT. FEE <b>I</b>        |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total                                       | *   | Minus                                 | **                             |                     | =                |       | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|  | Independent                                 | *   | Minus                                 | ***                            |                     | =                |       | X42=              |                        |       | X84=                       |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDEN     |   |                                       |                                |                     |                  | ┞     |                   |                        | OR    |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |   |                                       |                                |                     |                  |       |                   |                        | OR    | +280=                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                                       |                                |                     |                  |       |                   |                        |       |                            |                        |